

# **Outcome Measurements**

## **Contract Attachment**

### **RESPITE CARE PLACEMENTS**

#### **A. INTRODUCTION**

1. **Respite Services** are used to relieve a primary caretaker of their responsibilities for care.
2. Each client going into a respite care placement will have an assigned case manager, who is an employee of Jefferson County Human Service Department. The case manager's overall responsibility is to the client. This responsibility includes assessment, planning, referral to appropriate resources, follow-along, and advocacy. Recommendations regarding the use of respite care services will be made by the Purchaser to the Provider. It is the policy of the Purchaser that Respite Care placements will not exceed 30 days unless approved by the Contract Administrator or Program supervisor.

#### **B. PAYMENT FOR SERVICES**

1. The Provider is to submit billing statements to the Purchaser within three days after the month of service. The statement is to show the dates for which Respite Placement was provided to the consumer and the amount due. The Provider will submit a bill for the payment of Respite Care placements in addition to any other bill they send to the agency. Payments for Respite Care placements are taxable and must be submitted for payment on their own separate bill. Payments for authorized services for which statements are received on a timely basis will be made by the fifteenth of the month following the month of service. The rates to be paid by the Purchaser for services provided are as shown on the Contract Summary.
2. Payment will be made by the Purchaser only for actual services provided and documented on the billing statement. Variations from this must have written approval by the Purchaser's Contract Administrator or Program Supervisor.
3. If the contract rate is a per day rate, for part days round to the nearest whole number. (i.e. 11 hours does not count as a day; 13 hours does count as a whole day.) Variations from this standard must be approved in advance by the Alternate Care Supervisor or Alternate Care Coordinator.
4. Rates of payment are determined based on the level of support, training, and/or assistance needed by the client including self care, receptive and expressive language, mobility and self direction, independent living skills, social and emotional needs, recreational needs, and any other needs as identified by the Purchaser. Alternate Care staff are responsible for setting a rate with the provider for each Respite placement.
5. The Purchaser is not responsible for payment of security deposits or rent, or payments in advance of services provided.

#### **C. PROVIDER RESPONSIBILITIES**

1. The Provider is to comply with policies and procedures established by the Purchaser for Respite Care placements. Provider will comply with all standards and/or requirements in the provision of services to the consumer as outlined in the contract.
2. Provider will comply with training requirements and criminal background checks, in accordance with applicable Statutes and Standards, will maintain documentation of training received, and will provide the Purchaser with documentation of such on an annual basis.
3. The Provider is to notify the Purchaser immediately of any incidents affecting the health, safety or welfare of the consumer in their care.
4. The Provider will comply with confidentiality requirements and adhere to all legal rights of the client, in

Jefferson County Human Services Department

accordance with Wisconsin Administrative Code.

5. The Purchaser is not liable for personal injuries or property damages related to services provided under the contract. The Provider must maintain sufficient insurance coverage for loss due to injury, accident (including auto), or other damages.

**D. SERVICE REQUIREMENTS**

1. The Provider shall monitor activities and behaviors of the resident; and provide training and skill building, transportation, recreation and social activities, and other activities as necessary for the individual resident.
2. The Provider is to provide safe and professional services to the consumers they serve. The Provider will ensure that services will continue to be provided in a capable manner for those situations where the Provider is unable to personally fulfill the obligations of the contract.
3. The Provider will perform other activities and assists that are appropriate, as directed by the Purchaser.
4. The Provider is to interact with the client in a manner that is respectful and age appropriate. Any form of physical punishment or verbal abuse is strictly prohibited.
5. The Provider will consult with the consumer, guardian, and HSD Case Manager prior to any major purchases. Items purchased with client funds are to remain the property of the client. Co-mingling of consumer and Provider funds is strictly prohibited. Whenever client funds exceed \$200, the Provider will inform the HSD Case Manager.
6. The Provider will promote and assist the resident with participation in daily activities designed to provide social, emotional, and leisure time skills. The Provider will support and assist the client in maintaining relationships with family and friends and other support systems. The Provider may be requested to include transportation as a service for a particular client, with the cost of transportation built into the contract rate.
7. 'Provider to Provider' Respite Care for Provider vacations, etc. is to be arranged per licensing requirements and is not covered under this agreement.

---

Signature of Provider

---

Signature of Purchaser

---

Date of Signature

---

Date of Signature